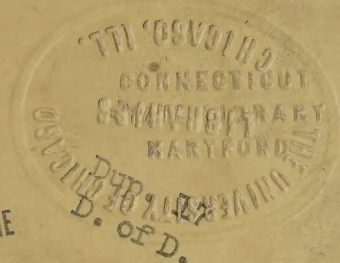


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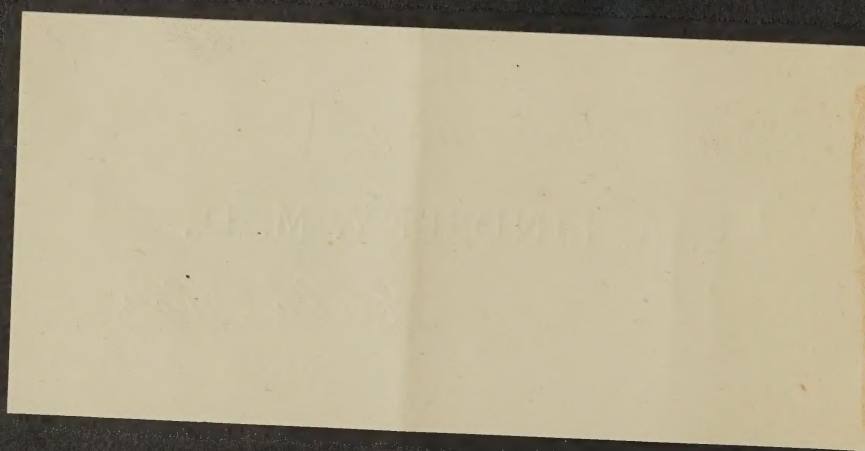
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With Compliments of

C. A. LINDSLEY, M. D.,

Health Officer.



SECOND ANNUAL REPORT

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OF THE

BOARD OF HEALTH

OF THE

CITY OF NEW HAVEN,

11

FOR 1874.

NEW HAVEN:

TUTTLE, MOREHOUSE & TAYLOR, PRINTERS.

1875.

BOARD OF HEALTH.

PRESIDENT.

HON. HENRY G. LEWIS, *ex officio*.

HON. LUCIEN W. SPERRY, <i>Acting President</i> ,	Term expires June 20th, 1876.
PROF. WILLIAM H. BREWER,	Term expires June 20th, 1874. 7
HENRY A. CARRINGTON, M. D.,	Term expires June 20th, 1875.
HON. H. M. WELCH,	Term expires June 20th, 1875.
PROF. CHARLES A. LINDSLEY, M. D.,	Term expires June 20th, 1877.
F. J. WHITTEMORE, M. D.,	Term expires June 20th, 1876.

C. A. LINDSLEY, M. D., *Health Officer*.

CHARLES R. WHEDON, *Clerk*.

STANDING COMMITTEE ON FINANCE.

H. M. WELCH.

STANDING COMMITTEE ON NUISANCES, &c.

C. A. LINDSLEY,

C. R. WHEDON.

Meets every Tuesday, from May 1st to October 1st, at 8 P. M. From October 1st to May 1st, the first Tuesday of each month, at 7 o'clock P. M.

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REPORT

OF THE

HEALTH OFFICER.

To the Board of Health:

GENTLEMEN,—I have the honor to submit the Annual Report of the Health Officer for the year 1874.

In making this Report, it is proper to state that, having been elected Health Officer within a month, and not having any records of the work of my predecessor, this Report is based upon such information as I have acquired in common with yourselves as members of this Board, and upon such general information as naturally falls within the observation of a physician in active general practice; and also upon the records of the Registrar of New Haven respecting vital statistics; summaries of which in various tabulated forms are herewith appended.

It is satisfactory to be able to say that the past twelve months have measured a period of more than average healthfulness in New Haven. No fatal epidemic has visited us; nor have the more dangerous forms of disease been as prevalent as usual; and while our mortality tables show a somewhat smaller harvest for the great reaper—Death, than he usually gathers, it is the uniform testimony also of the busiest medical practitioners among us, that an unwonted immunity from the lesser ills and ailments of life has been enjoyed by our citizens. So that in the language of the commercial world it may be truly said—it has been a poor year for doctors.

The beginning of 1874 found us in the midst of a comparatively harmless epidemic of a somewhat rare disorder, the roseola rubella, or hybrid measles. It occurred almost as much among adults as children, and showed a decided preference for females. At no time in the memory of the present generation has it prevailed so extensively. Its sudden appearance in families at first ex-

cited the most anxious alarm: it being mistaken for its kindred irruptive fever, the measles, or the still more to be dreaded scarlet fever. And the family physician was often hastily summoned to confirm or dispel the fears thus aroused. The preliminary symptoms were sometimes (not invariably) pains in the back and limbs, with nausea and a little febrile action, soon followed by an irruption, which in the early stages bore so close a resemblance to that of measles, that until it was recognized as a distinct disorder, physicians of long experience unhesitatingly called it measles. But later in its progress, when the redness became more diffused and confluent, previous experience was often baffled again, by its likeness to scarlet fever. It seemed to possess an aptness for associating with other disorders. It sometimes appeared as the precursor of genuine measles. In other cases it was co-existent with influenza—and in another instance which your reporter saw, it excited a wholesome alarm in a youth suffering with acute gonorrhæa. The irruptive period seldom exceeded three days, and was often of shorter duration.

Pneumonia.

Of the fatal acute diseases in this climate during the past year pneumonia has more than maintained its relative high rank as a destroyer. While every month has claimed its victims, far the larger number of fatal cases occurred in the first four months of the year. And although the whole mortality from this affection was only sixty-five, but one other acute disease, viz: the cholera infantum, was more deadly; while of the whole list of human maladies only one other proved more destructive to life, and that was the great scourge of America, consumption.

Bronchitis

In its acute form is usually excited by the like causes with the last, and they commonly prevail at the same time in communities. It occurred with more than usual frequency in the early part of the year, and in a few cases in a fatal form.

Influenza.

The months of April and May were characterized pathologically by the presence of many cases of influenza, though not in any instance did it prove destructive to life.

Cholera Infantum.

As we advance in the year and approach the heated term, the great enemy of infant life manifests its power, and during the months of July, August and September, cholera infantum rudely tore from the yearning hearts of almost as many bereaved mothers more than eighty little innocents.

A disease like this, influenced as it is so largely by hygienic conditions, affords a field worthy of the special attention of Boards of Health. The localities in which it is most prevalent should be carefully noted and the sanitary surroundings thoroughly studied; particular regard being paid to food, ventilation and cleanliness. So often does convalescence follow immediately the removal of the little sufferers to the free pure air of the open country, that the conviction is almost irresistible, that a proper observance of hygienic laws would vastly diminish the mortality from this disease. This consideration would almost justify the requirement that it should be included in the list with those diseases dangerous to the public health, and of which immediate notice shall be given to the Board upon every occurrence of it.

Typhoid Fever.

As cholera infantum is emphatically the summer complaint of infants, so in but little less degree is typhoid fever peculiar to youth and middle age, in the autumnal season. During the past year it has maintained about its usual importance among the more dreaded acute disorders. The study of the etiology of typhoid fever has of late assumed a new interest, and recent investigations encourage the hope that the time is not distant when its extension in any community will be as much under control by judicious precautions as small pox is by vaccination.

In this view I would earnestly recommend that among the earliest amendments of our by-laws, this disease be included among those which are specially under the supervision of this Board in the same manner as is small pox, cholera, &c. Your Reporter believes that it may be as certainly and effectually stamped out of existence in our city as either of the last named diseases, if the same well known precautions regarding *isolation*, *ventilation* and *disinfection* be as rigidly observed.

Two objects would be had in view by requiring a report to this office of each case of typhoid fever that appears in the city :

1st. To diminish to the minimum the possibilities of its communication to new subjects, and

2d. To estimate the proportion of fatal cases to the whole number—which there is no satisfactory means of doing under existing customs. The first object should be sought not by interference in the least degree with any curative measures that may be preferred by the patient or his medical attendant, but solely and simply by instruction to the nurses in respect to the three cardinal principles, cleanliness, ventilation and disinfection, in accordance with those methods which the best experience has determined to be most efficient.

Perhaps it may occasion some surprise in the public mind to propose such a measure now, and more patience should be exercised until popular sentiment can be educated up to the importance of the subject. But I predict *the time is not far distant when an enlightened public will demand the protection which such a measure will afford.* I therefore submit the idea to this Board as worthy of thoughtful consideration.

Many other advantages besides those mentioned will readily suggest themselves as connected with such practice.

Typhus Fever.

Two fatal cases of typhus fever are on record as occurring in the months of August and September. It seems almost incredible that a disease as contagious as typhus fever is, should have had two victims, a month apart, and not extended its ravages further. The record is at least open to the suspicion that the diagnosis is erroneous in both cases, and that they were typhoid and not typhus.

Scarlet Fever.

This frightful malady, which so often rages with unmanageable ferocity among children, has during the past year been comparatively a merciful visitor. Only three in the whole year are recorded as its victims; while previously, for many years together, it has contended for the supremacy with cholera infantum in its ravages upon our loved ones.

Measles.

Measles was more prevalent in the beginning of the year than afterwards, but mostly of a benignant type; and no fatal cases are recorded since April.

Small Pox.

Last and least in importance among the irruptive diseases I mention, is the small pox. I allude to it with the more satisfaction as affording an apt illustration of the value of energetic, well-directed action in protecting the public health, when such action is sustained and approved by public sentiment. The popular prejudice against this loathsome malady is so strong, that the good public cheerfully submit to any judicious regulations which the Board of Health may impose to protect them from its contagion.

In the few instances in which this disease has gained admission within our borders during the past year, immediate notice of its presence has been followed by prompt attention on the part of this Board to those precautions best calculated to prevent its spread. Thus it has scarcely been allowed to perpetuate itself among our citizens by contagion.

The individual instances of small pox and varioloid occurring among us, have, we believe, with one exception, been fresh importations from without the city, and by the precautions adopted by this Board against contagion the disease has been limited, with the single exception mentioned, to those primarily affected.

I say it is very satisfactory to mention this, because few if any places of the size of New Haven, and as much open to exposure by reason of being a seaport town and a railroad centre, have been so free from this dreaded scourge in the year past. But one death has occurred in New Haven, while in almost all the neighboring towns and cities its victims have been numerous. Therefore, I repeat, our experience affords an apt illustration of the usefulness of Boards of Health when their action is sustained by popular approval.

The earliest case in the year occurred in January, in the form of varioloid, in a child which had been but imperfectly vaccinated. The only source of contagion at all suspicious in this case was through letters received in the family from a locality one thousand miles away in the West, in which small pox was very prevalent. Although this patient lived in a thickly settled part of the city, the disease was not communicated to any one. The child recovered. The next cases were in the persons of a brakeman employed on the N. Y., N. H. & H. Railroad, and simultaneously of a child in a densely populated part of the city, more than a mile distant from the residence of the brakeman. Both these cases were varioloid in a mild form. About 20 days after, another brakeman, employed

on the same road—an intimate friend of the first, and residing near him, was seized with confluent small pox. It is fair to suppose that he took the disorder from his friend. He had never been vaccinated, and he paid the penalty of his neglect with his life. He died at the hospital for infectious diseases, on the 17th day of his illness, with confluent hemorrhagic small pox. This was the only fatal termination within the limits of the town in 1874. The Board have been notified at various times through the year of other suspected cases, several of which, upon investigation by the small pox physician, Dr. Bellosa, were found to be chicken pox.

The year closes with but two cases existing—one a child of seven years with distinct small pox, and a good prospect of recovery; and the other a married woman with varioloid in a mild form. These two cases were reported to this office on the same day. They are entire strangers to each other, and live upon opposite sides of the city. The origin of these cases is not as yet discovered.

Diphtheria.

This dangerous disorder, which at the present time and for a month or two past is and has been such a scourge to the city and vicinity of New York, has visited us in the year just gone but mildly. May its merciful kindness to us ever continue.

Malarial Diseases.

During the past ten years, intermittent fever and other phases of malarial disease have prevailed in this city and in the neighboring towns, to an extent before unknown to any persons now living. For the greater part of the time the paroxysmal type, commonly called fever and ague, has been predominant. But for a year or more past the character of morbid action has been materially modified; and instead of the regular intermittent, with its periodically-recurring paroxysms, the malarial impression has manifested itself in more irregular methods. The form popularly known as the "dumb ague" has been frequent; and during the last summer and autumn the distinctly marked remittent fever has been more common than in many years before.

Consumption

Continues, as heretofore, to lead all other maladies in its destructive power over human life. One hundred and ninety-seven of New Haven's citizens have paid the tribute of their lives to the merci-

less demands of this consuming foe, in the year just ended. This is a large advance on the mortality from the same cause in previous years. It suggests very pointedly the inquiry, whether the popular belief that there is an antagonism between fever and ague and consumption is not in some degree confirmed by this fact. The declining frequency of the former disorder followed so immediately by the increased malignancy of the latter is at least a suggestive fact, and as such, and only such, I mention it. The statistics of one locality and of a single decade of years will by no means afford the necessary data for a solution of the problem.

I have now passed in review the more prominent causes of death which have been operative in New Haven since a year ago. The other forms of sickness with which we have been afflicted do not seem to call for any special comment.

Definite information regarding the mortality of any particular unhealthiness may be obtained by consulting the appended mortuary tables.

The classification of diseases is necessarily arbitrary and artificial to a considerable degree. Diseases are not independent entities. Each one does not operate alone, and irrespective of others, claim its own separate victims. But more commonly every fatal disorder is more or less complicated with a variety of morbid conditions, and the certificates of death from which our mortality records are made usually state only the one which is most directly and prominently the cause of death. Another impediment to an accurate classification exists in the want of correctness and clearness of diagnosis on the part of physicians who render the certificates. Every large community is infested with a class of self-styled doctors, who without any previous training or education at all adequate to fit them for the responsible duties which they so boldly assume, live and practice upon the credulity of their afflicted fellow creatures. This kind is composed of both sexes (anatomically speaking). The certificates of death returned by these ignorant and unprincipled persons are, for obvious reasons, entirely unreliable as regards diagnosis. Indeed, it is known that they are often wilfully incorrect, certifying that death has occurred from an incurable affection of some vital organ, rather than the true cause, lest their reputation may suffer by admitting that they have lost a patient of any ordinary disease.

And again, there is great inaccuracy by reason of an inexcusable indifference to this matter on the part of the profession generally.

A recent writer says, "Physicians seem fearful of writing too much upon the certificates of death. They usually confine themselves to a single word, and that, too, one of great latitude of meaning, as 'inanition,' 'dropsy,' 'marasmus,' 'debility,' 'atrophy,' 'abscess,' &c., without specifying definitely the location or character of the disease. While not denying the existence of idiopathic dropsy, or the appropriateness of the occasional use of the single words inanition or atrophy, or of some other term to express a prominent effect, when its cause cannot be discovered, I must earnestly urge that in the majority of cases, a more complete diagnosis being practicable, a more complete diagnosis should be given. Thus, instead of dropsy alone, let its cause be added, whether renal, cardiac or hepatic; if inanition be prominent, let it be stated whether it result from diarrhœa, dysentery, or some other form of wasting disease; if cancer or abscess result in death, let the location of the disease be named."

Occasionally the cause of death is given in a term so vague and indefinite as utterly to defy any attempt at classification. For example, among the records of the year I find the following: "infantile," "congestion," "sudden prostration."

I believe it will be only necessary to call the attention of the educated profession to the importance of this matter to secure an immediate reform. At least, if in special diseases perfect exactness is not attainable, yet classes of kindred diseases may be satisfactorily grouped, so as to exhibit the mortality from a whole group at once. This is especially desirable with regard to the zymotic group, which includes in large part such diseases as are measurably preventable, and claim the most serious attention of sanitarians.

In the blanks for certificates of death recently prepared by the Board of Health, it is provided that the street, number of house, and the ward of the city shall be mentioned, in which each death has occurred. This very practical matter has not been satisfactorily observed by those rendering death certificates. It is highly desirable that this information should never be omitted. As a basis for estimating the comparative sanitary conditions of different parts of the city, it would be invaluable. In many cases it would guide to the discovery of the causes of the prevalence of diseases in localities, and possibly their removal. It is earnestly requested that the Records of 1875 may be complete in this particular.

Here I beg leave to acknowledge my indebtedness to Dr. F. Gallagher, Registrar of Births, Marriages and Deaths, for special facilities in examining the records of his office.

While upon the subject of Registration of Vital Statistics, I would suggest for the serious consideration of this Board, if it is not advisable to procure the enactment of such legislation on the part of the city authorities as will secure weekly instead of monthly returns to the Registrar? This would be in accordance with the practice of all large cities.

Sewers.

Whatever sanitary conditions may belong, naturally, to any city, as regards location, elevation, climate, temperature, &c., and whatever careful attention to hygienic laws may be observed by its inhabitants, the time will surely come when by greater density of population, and ever-increasing saturation of the soil with the filth that is the inevitable concomitant of localized aggregated human life, all these favorable conditions will be more and more vitiated, unless some thorough and effective method for the entire removal of this filth be adopted. Surface drainage will not suffice. The cesspool system soon exhausts itself—but too often not until the back-yards of city dwellings get to be honey-combed with vile pestiferous breeding holes of disease, from which issue constant streams of miasmatic poison, to multiply and perpetuate every zymotic disorder that may prevail.

The underground sewer system is the most satisfactory device yet discovered for obviating this impending danger. Our worthy Mayor, with that foresight and energy which has so often characterized his devotion to the interests of New Haven, in the first year of his mayoralty, set himself to provide for and put in process of construction a thorough and comprehensive system of sewerage, adequate to the wants of New Haven, both present and perspective. There have been constructed during the year about $3\frac{1}{2}$ miles of sewers, in 27 different streets, part of it by recommendation of this Board, for the purpose of improving the salutary condition of certain localities. Throughout the city there are now 30 miles of these subterranean arteries, through which enormous quantities of foul matter are discharged, which if not removed would surely become agencies for the production or perpetuation of disease.

Experience everywhere is unanimous in regarding thorough

and efficient sewerage as among the most important factors in the preservation of health in densely populated cities. Incredible as it may seem, it has been found, that in certain diseases the death percentage to population varies quite accurately with the number of lineal feet of sewers in different districts of the same city. Such was found to be the fact in some very interesting observations and estimates made by Dr. Rauch, the Sanitary Superintendent of Chicago. His observations were made with reference to children under six years of age. Dr. R. says, "prepare tables and group data as I may, the same general facts meet me." Dr. Morris, of New York, says, "The subject of *defective* sewerage and drainage so intimately relates to the continuance of good health, and the prolongation of life, that its importance cannot be over-estimated. Wherever there is a human habitation its influence extends, and as these become more numerous, or aggregated, and of longer continuance, the greater the need of the light and enforcement of sanitary law."

It seems wise to speak with some emphasis of the universal testimony to the salutary effect of thorough sewerage, that our citizens may be more thoroughly impressed with its value and more generally avail themselves of its advantages. And now has not the time fully arrived when the further construction of privy vaults in sewered districts should be prohibited by legislation? Or, indeed, why delay longer in requiring the occupants of every dwelling or other building located on the line of a public sewer to cease at once and forever the storing up on their premises their daily accumulations of nastiness, and the fecal evacuations of their persons?

Garbage.

For particular statements respecting the removal of kitchen garbage, I refer you to the report of the Clerk of the Board. It is mentioned here as belonging in the same class of hygienic measures as the last topic, and is only secondary to it in importance. As a mere convenience, now become by use indispensable to our citizens, I do not speak of it, but wholly in a sanitary sense. The many hundred tons of refuse food discarded from our kitchens would for the most part become, if not removed, like a mass of corrupting and putrefying vegetable and animal matter spread all over the face of our fair city, to pollute the air we breathe and offend our nostrils with its stench. Comment is not necessary to enforce the importance of its removal.

Tenement Houses.

As real estate increases in value in cities, the effect is to crowd every available space with buildings, to augment the productive value of the property. In districts occupied by the dwellings of the poor this practice is carried to a great extreme, often without the slightest regard for those hygienic considerations which are essential to the health of the occupants. Hence in every well regulated city it becomes indispensable for Boards of Health or other constituted authority to interpose between the remorseless avarice of landlords and the rights of their helpless and suffering tenants. Too often, however, such protection is not afforded to the poor until the public attention is aroused to its importance by the havoc of some terrible epidemic of disease breaking out in such localities, and carrying terror and death throughout the community. The experience of all civilization teaches that, unless specially regulated by legal supervision, this evil is sure to exist in all dense populations; and it is equally true that if neglected and allowed unrestrained license, it rapidly acquires such dimensions that its correction is attended with immense difficulty and cost. I beg leave, therefore, to respectfully call the attention of this Board to the fact that our own city is not altogether free from this evil, although it is not yet conspicuous. But whereas the prevention of a foreseen calamity is always vastly easier than repairing its consequences, I would suggest that it is appropriately and legitimately within the sphere of the duty of this Board to consider what ought to be done to avert an evil that always becomes, if not restrained, a serious one in all large communities.

Conclusion.

In conclusion, permit a word in reference to our own duties and responsibilities. Our duties are of a double nature. We are, in a manner, pioneers in this special field of labor in our State. The functions of our office are new and largely unfamiliar to our constituents; hence we must be both educators and servants of the people. We have not only to supervise and direct in matters concerning public health, but it is now equally important that we should, by all proper methods, educate the people to a due appreciation of the great advantage to them of such supervision and direction. For this reason there is constant need for prudent and wise action, whenever our duty compels us to the discharge of functions which have the character of novelty and innovation on

established customs. We are not to content ourselves with merely playing the role of a nuisance committee, abating the petty contentions of neighbors about privies and pigstyes. But our responsibilities cover a far broader, more extended and comprehensive field.

When the public come to comprehend our true official character, as in time they will, we shall be expected not only to supervise and, when possible, direct in matters affecting public health, but also to become a source of information in regard to all questions of public hygiene. We are to know and be able to inform and advise in regard to everything connected with the physical well being of our fellow citizens.

In this regard we owe a duty not only to ourselves but to our co-laborers in the same field in other States. We are to exchange experiences with them, and by our own investigations add if possible to the common stock of practical knowledge. When communities come to learn the fact, which is a fact, that a large proportion of the ills mankind suffer are in their nature *preventable*, and by due observance of hygienic laws *may be prevented*; then will the responsibilities of "Boards of Health" be fully appreciated, their acts sustained by public approval, and the fullest practical advantages will flow from them. Until then we must magnify our office.

In taking a retrospective view of the work accomplished since the organization of this Board, there is reason to be satisfied that so much work has been done, and well done; and there is also reason for a faith that what we have done will prove even more valuable in the character of a basis or firm foundation upon which to build, and whence we may hope that in the future much practical good results will follow.

All of which is respectfully submitted,

CHARLES A. LINDSLEY, M.D.,

Health Officer.

DEATHS IN NEW HAVEN FROM ALL CAUSES,

DURING THE YEAR 1874.

CAUSES OF DEATH.	TOTAL.	AGE.													SEX.		
		Under 1 yr.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	Over 100.	Unknown.	Male.	Female.
All Causes,-----	1073	279	133	17	49	101	113	110	75	79	68	30	6	13	507	566	
Specified Causes,-----	1063	277	132	17	49	99	112	110	74	79	68	29	6	11	500	563	
Unknown Causes,-----	10	2	1	--	--	2	1	--	--	--	--	1	--	2	7	3	
CLASSES.																	
I. Zymotic Diseases,-----	219	95	52	6	15	14	13	7	8	1	7	1	--	--	91	128	
II. Constitutional Diseases,-----	249	18	15	2	16	42	48	43	26	23	11	2	--	3	114	135	
III. Local Diseases,-----	399	89	49	5	12	27	36	55	36	47	31	9	--	3	195	204	
IV. Developmental Diseases,-----	161	73	13	1	1	7	11	2	3	5	19	16	6	4	74	87	
V. Violent Deaths,-----	35	2	3	3	5	9	4	3	1	3	--	1	--	1	26	9	
I. Orders.																	
1. Miasmatic Diseases,-----	211	91	52	6	15	13	12	6	7	1	7	1	--	--	87	124	
2. Enthetic Diseases,-----	3	2	--	--	--	--	--	1	--	--	--	--	--	--	--	3	
3. Dietetic Diseases,-----	5	2	--	--	--	1	1	--	1	--	--	--	--	--	4	1	
II.																	
1. Diathetic Diseases,-----	33	2	1	--	1	--	4	5	8	7	2	1	--	2	8	25	
2. Tubercular Diseases,-----	216	16	14	2	15	42	44	38	18	16	9	1	--	1	106	110	
III.																	
1. Dis. of Nervous System,--	152	55	30	4	3	4	7	13	7	13	13	2	--	1	75	77	
2. " Org. of Circulation,	66	3	2	--	4	5	7	12	10	12	9	2	--	--	32	34	
3. " Respiratory Organs,	98	20	15	1	--	7	10	15	9	11	6	2	--	2	52	46	
4. " Digestive Organs,--	49	10	2	--	1	6	11	6	4	5	2	2	--	--	20	29	
5. " Urinary Organs,-----	27	--	--	--	3	5	--	9	4	4	1	1	--	--	15	12	
6. " Generative Organs,	4	--	--	--	--	--	1	--	1	2	--	--	--	--	--	4	
7. " Org. of Locomotion,	3	1	--	--	1	--	--	--	1	--	--	--	--	--	1	2	
IV.																	
1. Develop. Dis. of Children,	31	26	5	--	--	--	--	--	--	--	--	--	--	--	19	12	
2. " " Women,--	17	--	--	--	1	7	8	1	--	--	--	--	--	--	--	17	
3. " " Age,-----	38	--	--	--	--	--	--	--	--	1	17	14	6	--	13	25	
4. " " Nutrition,	75	47	8	1	--	--	3	1	3	4	2	2	--	4	42	33	
V.																	
1. Accident,-----	34	2	3	3	5	9	4	3	1	2	--	1	--	1	25	9	
2. Suicide,-----	1	--	--	--	--	--	--	--	--	1	--	--	--	--	1	--	
Unknown,-----	10	2	1	--	--	2	1	--	1	--	--	1	--	2	7	--	

TABLE showing Deaths by Ages and Sexes.

CAUSES OF DEATH.	AGE.														SEX.			
	TOTAL.	Under 1 yr.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	Unknown.	Male.	Colored.	Female.	Colored.
CLASS I.—Zymotic.																		
ORDER 1.—(Miasmatic.)																		
Rubeola,	6	3	3	—	—	—	—	—	—	—	—	—	—	—	4	—	2	—
Scarlatina,	3	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—
Variola,	1	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	—
Diphtheria,	7	1	5	—	—	—	1	—	—	—	—	—	—	—	3	—	4	—
Croup,	5	—	5	—	—	—	—	—	—	—	—	—	—	—	5	—	—	—
Membranous Croup,	17	3	11	2	—	1	—	—	—	—	—	—	—	—	8	—	9	—
Pertussis,	6	2	4	—	—	—	—	—	—	—	—	—	—	—	2	—	4	—
Erysipelas,	8	4	1	1	—	—	—	1	—	—	1	—	—	—	4	1	3	—
Typhus Fever,	2	—	—	1	—	—	1	—	—	—	—	—	—	—	1	—	—	—
Typhoid Fever,	45	1	2	1	12	9	8	4	5	1	2	—	—	—	23	1	18	3
Congestive Chills,	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Malaria,	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Remittent Fever,	2	—	—	—	—	—	—	—	1	—	1	—	—	—	1	—	1	—
Typho Malarial Fever,	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—
Pyæmia,	3	1	—	—	—	1	—	1	—	—	—	—	—	—	1	—	2	—
Septicæmia,	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—
Diarrhœa,	6	3	—	—	—	—	—	—	—	—	2	1	—	—	—	2	4	—
Dysentery,	2	—	2	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—
Cholera Morbus,	2	—	—	—	—	—	—	—	1	—	1	—	—	—	1	—	1	—
Cholera Infantum,	86	70	16	—	—	—	—	—	—	—	—	—	—	—	26	1	57	2
Cerebro Spinal Meningitis,	6	1	—	1	3	1	—	—	—	—	—	—	—	—	1	—	5	—
ORDER 2.—(Enthetic or Inoculated.)																		
Syphilis,	3	2	—	—	—	—	—	1	—	—	—	—	—	—	—	—	3	—
ORDER 3.—(Dietic.)																		
Anæmia,	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Purpura, Hemorrhagic,	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Alcohol—{ Intemperance,	1	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	—
ism. { Mania-a-potu,	2	—	—	—	—	—	1	—	1	—	—	—	—	—	2	—	—	—
Rachitis,	1	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—
CLASS II.—Constitutional.																		
ORDER 1.—(Diathetic.)																		
Cancer of Face,	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
“ Jaw,	1	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	—
“ Lung,	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
“ Breast,	5	—	—	—	—	—	—	1	1	2	—	—	—	1	—	—	5	—
“ Liver,	4	—	—	—	—	—	1	1	1	—	1	—	—	—	2	—	2	—
“ Stomach,	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—
“ Uterus,	2	—	—	—	—	—	—	1	1	1	—	—	—	—	—	—	2	—
Cancer,	11	—	—	—	—	—	3	—	2	4	—	1	—	1	1	—	10	—
Rheumatism,	3	1	—	—	—	—	—	1	1	—	—	—	—	—	1	—	2	—
Scrofula,	4	1	1	—	1	—	—	—	—	—	1	—	—	—	2	1	1	—

CAUSES OF DEATH.	TOTAL.	AGE.												SEX.				
		Under 1 yr.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	Unknown.	Male.	Colored.	Female.	Colored.
ORDER 2.—(Tubercular.)																		
Phthisis Pulmonalis,	197	7	8	1	15	42	43	38	17	16	8	1	1	95	2	93	7	
Tabes Mesenterica,	2								1		1					2		
Hydrocephalus,	12	8	4											5		7		
Tubercular Meningitis,	4	1	2	1										3		1		
CLASS III.—Local.																		
ORDER 1.—(Nervous.)																		
Meningitis,	18	7	6	2	1		1	1						9	1	6	2	
Encephalitis,	14	6	4					2	1				1	10	1	2	1	
Apoplexy,	25			1				3	5	8	7	1		11	1	13		
Softening of Brain,	1									1						1		
Insanity,	1							1								1		
Epilepsy,	2					1					1			1		1		
Convulsions,	45	28	14		2		1							17	1	26	1	
Paralysis of Brain,	1	1														1		
Paralysis,	13				1		2	1	3	4	1			5		8		
Shaking Palsy,	1													1				
Tetanus,	3	1			1		1							3				
Trismus Nascentium,	3	3												2		1		
Laryngismus Stridulus,	1	1														1		
Sun Stroke,	1			1										1				
Congestion of Brain,	8	3	1			1	2	1						3	1	3	1	
Disease of Brain,	13	5	4				2	1		1				5	1	7		
Spinal Meningitis,	2		1					1						1		1		
ORDER 2.—(Circulatory.)																		
Paralysis of Heart,	2								1		1			1		1		
Cardiac Hypertrophy,	1									1						1		
Angina Pectoris,	4					1				1	1	1		2		2		
Fatty Degen. of Heart,	1							1								1		
Pericarditis,	5		1		1		1	1			1			2		3		
Endocarditis,	2				1		1							1		1		
Valvular Disease,	2									2				1		1		
Disease of Heart,	24	2			2	3	3	2	4	5	2	1		8	2	11	3	
Cardiac Dropsy,	1										1					1		
Hepatic Dropsy,	1							1								1		
Dropsy seq. of Scarlatina,	1		1											1				
Dropsy,	17					1	1	5	5	3	2			7	3	7		
General Atheroma,	1									1				1				
Phlebitis,	1						1									1		
Embolism,	2							2						2				
Epistaxis,	1	1												1				
ORDER 3.—(Respiratory.)																		
Laryngitis,	1		1											1				
Bronchitis,	13	6	4			1		1		1				6	1	6		
Pneumonia,	52	8	7	1		1	5	9	8	7	3	2	1	22	2	27	1	
Pneumonia, Typhoid,	13		1			4	3	3			1		1	5	2	6		
Pleuritis,	3						1	1						3				
Congestion of Lungs,	11	6	2						1	2				6		5		
Emphysema,	1										1					1		
Hæmoptysis,	3					1	1	1						3				
Paralysis of Lungs,	1										1			1				

CAUSES OF DEATH.	TOTAL.	AGE.												SEX.				
		Under 1 yr.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	Unknown.	Male.	Colored.	Female.	Colored.
ORDER 4.—(<i>Digestive.</i>)																		
Stomatitis, -----	2	2															2	
Laryngitis, -----	1		1												1			
Gastritis, -----	5					1	2		2								4	1
Hæmatemesis, -----	1	1															1	
Enteritis, -----	7	2					1	2		1		1			4		3	
Peritonitis, -----	7				1	1	3			1		1			3		4	
Jaundice, -----	1	1															1	
Ascites, -----	3								1	1	1					1	2	
Intussusception of Intestines, -----	1										1				1			
Obstruction of Bowels, -----	2					1	1								1		1	
Disease of Spleen, -----	1						1										1	
Colic, -----	1	1															1	
Hemorrhage of Bowels, -----	2	1				1									1		1	
Fatty Degen. of Liver, -----	1						1										1	
Cirrhosis of Liver, -----	3					1	1	1							3			
Hepatitis, -----	1							1							1			
Disease of Liver, -----	4	2							1	1					1		3	
Dyspepsia, -----	1							1									1	
Chronic Diarrhœa, -----	5		1			1	1	1		1					3		2	
ORDER 5.—(<i>Urinary.</i>)																		
Nephritis, -----	3				1	1			1								3	
Nephria (Bright's Disease). -----	13							7	3	2	1				5	2	6	
Uræmia, -----	3				2					1					2		1	
Diabetes, -----	2				1										2			
Calculus, -----	1											1					1	
Cystitis, -----	2				1	1							1		2			
Prostatitis, -----	1									1					1			
Gangrene of Kidney, -----	1							1									1	
Rupture of Bladder, -----	1					1									1			
ORDER 6.—(<i>Generative.</i>)																		
Ovarian Tumor, -----	4						1		1	2							4	
ORDER 7.—(<i>Locomotory and Osseous.</i>)																		
Spina Bifida, -----	1	1															1	
Necrosis of Spine, -----	1				1												1	
Carbuncle, -----	1								1						1			
CLASS IV.—Developmental.																		
ORDER 1.—(<i>Children.</i>)																		
Atalectasis (Pulmonum), -----	2	2													1		1	
Premature Birth, -----	14	14													8	1	5	
Cyanosis, -----	1	1													1			
Dentition, -----	3		3														3	
Infantile, -----	11	9	2												8		3	

CAUSES OF DEATH.	TOTAL.	AGE.											SEX.					
		Under 1 yr.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	Unknown.	Male.	Colored.	Female.	Colored.
ORDER 2.—(<i>Women.</i>)																		
Hemorrhage, -----	1	--				1											1	--
Puerperal Fever and Metro-																		
Peritonitis, -----	12	--				5	7										11	1
Puerperal Convulsions, ---	3	--			1	1	1										3	--
Placenta Previa, -----	1	--						1									1	--
ORDER 3.—(<i>Old Age.</i>)																		
Senile Debility, -----	38	--								1	17	14	6		12	1	24	1
ORDER 4.—(<i>Nutrition.</i>)																		
Atrophia, Marasmus, As-																		
thenia, and Debility, ---	74	47	8	1	--	--	2	1	3	4	2	2	--	4	41	--	33	--
Scurvy, -----	1	--					1								1	--		
CLASS V.—Violence.																		
ORDER 1.—(<i>Violent Deaths.</i>)																		
Fracture of Neck of Femur,	1	--										1	--		--		1	--
Contusions, -----	1	1	--												--		1	--
Killed by Railroad, -----	4	--				3	1								4	--		
Fall, -----	4	--		2	--		1	1							3	--	1	--
Burns and Scalds, -----	4	--	2	1	--	1	--								2	--	2	--
Poisoned by Gas, -----	1	--												1	1	--		
Asphyxia, -----	2	1	--			1	--								1	--	1	--
Drowned, -----	7	--	1	--	3	--	2	--		1	--				7	--		
Exposure, -----	1	--				1	--										1	--
Fracture of Skull, -----	3	--			1	1	--			1	--				3	--		
Concussion of Brain, -----	2	--			1	--				1	--				1	--	1	--
Poisoned, -----	2	--				1	--	1	--						1	--	1	--
Powder Explosion, -----	2	--				1	--	1	--						2	--		
ORDER 2.—(<i>Suicide.</i>)																		
Suicide, -----	1	--								1	--						1	--
Cause not ascertained, ---	10	2	1	--	--	2	1	--	1	--		1	--	2	6	1	3	--
TOTAL DEATHS, -----																		
Stillborn, -----	1073	81	--												43	1	35	2

TABLE showing Deaths by Months.

CAUSES OF DEATH.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTAL.
CLASS I.—Zymotic.													
ORDER 1.—(<i>Miasmatic.</i>)													
Rubeola, -----	2	2	1	1	--	--	--	--	--	--	--	--	6
Scarlatina, -----	1	--	1	--	--	--	--	--	--	--	1	--	3
Variola, -----	--	--	--	--	--	--	--	--	--	--	1	--	1
Diphtheria, -----	3	--	--	--	--	--	--	1	--	1	1	1	7
Croup, -----	--	--	1	--	--	--	--	1	1	2	--	--	5
Membranous Croup, -----	3	--	--	1	1	1	--	1	6	1	3	--	17
Pertussis, -----	--	--	1	--	--	--	--	--	1	--	1	3	6
Erysipelas, -----	1	1	--	2	--	--	1	1	1	--	1	--	8
Typhus Fever, -----	--	--	--	--	--	--	--	1	1	--	--	--	2
Typhoid Fever, -----	3	1	1	2	4	1	6	5	5	7	5	5	45
Congestive Chills, -----	--	--	--	--	--	--	--	--	1	--	--	--	1
Malaria, -----	--	--	--	--	1	--	--	--	--	--	--	--	1
Remittent Fever, -----	--	--	--	--	--	--	1	--	--	--	1	--	2
Typho Malarial Fever, -----	--	--	--	--	--	--	--	--	--	--	--	1	1
Pyæmia, -----	--	1	1	--	--	--	--	--	--	1	--	--	3
Septicæmia, -----	--	--	--	--	--	--	--	1	--	--	--	--	1
Diarrhœa, -----	--	--	--	--	--	1	3	2	--	--	--	--	6
Dysentery, -----	--	--	--	--	--	--	--	2	--	--	--	--	2
Cholera Morbus, -----	--	--	--	--	--	--	2	--	--	--	--	--	2
Cholera Infantum, -----	--	--	1	1	--	1	27	42	13	1	--	--	86
Cerebro-Spinal Meningitis, -----	--	1	--	1	--	1	1	1	--	--	1	--	6
ORDER 2.—(<i>Enthetic or Inoculated.</i>)													
Syphilis, -----	--	1	--	--	1	--	--	--	--	1	--	--	3
ORDER 3.—(<i>Dietic.</i>)													
Anæmia, -----	--	--	--	1	--	--	--	--	--	--	--	--	1
Purpura Hemorrhagica, -----	--	--	--	--	--	--	--	--	--	--	1	--	1
Alcoholism { Intemperance, -----	--	--	--	--	--	--	--	--	--	1	--	--	1
{ Mania-a-potu, -----	1	--	--	--	1	--	--	--	--	--	--	--	2
Rachitis, -----	--	--	1	--	--	--	--	--	--	--	--	--	1
CLASS II.—Constitutional.													
ORDER 1.—(<i>Diathetic.</i>)													
Cancer of Face, -----	--	--	--	1	--	--	--	--	--	--	--	--	1
“ Jaw, -----	--	--	--	--	1	--	--	--	--	--	--	--	1
“ Lung, -----	--	--	--	--	--	--	--	--	--	1	--	--	4
“ Breast, -----	1	--	--	--	--	1	1	1	--	1	--	--	5
“ Liver, -----	--	--	--	--	--	--	--	--	--	--	1	--	1
“ Stomach, -----	--	--	--	1	1	--	1	1	--	--	--	--	4
“ Uterus, -----	--	--	--	--	--	1	--	--	--	--	--	1	2
Cancer, -----	1	--	1	--	1	1	2	1	2	--	2	--	11
Rheumatism, -----	--	--	--	1	--	--	--	1	--	--	--	1	3
Scrofula, -----	--	--	1	--	--	--	1	1	1	--	--	--	4
ORDER 2.—(<i>Tubercular.</i>)													
Phthisis Pulmonalis, -----	14	14	17	26	13	21	13	16	11	19	21	12	197
Tabes Mesenterica, -----	--	1	--	--	--	--	--	1	--	--	--	--	2
Hydrocephalus, -----	3	--	4	1	--	1	2	1	--	--	--	--	12
Tubercular Meningitis, -----	--	--	--	--	1	--	--	1	--	--	1	1	4

CAUSES OF DEATH.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTAL.
CLASS III.—Local.													
ORDER 1.—(Nervous.)													
Meningitis, -----	3	1	4	—	2	2	—	2	1	2	1	—	18
Encephalitis, -----	1	1	—	2	3	1	1	—	3	—	—	2	14
Apoplexy, -----	1	1	1	2	3	6	2	1	1	4	1	2	25
Softening of Brain, -----	—	—	—	—	—	—	—	—	—	—	—	1	1
Insanity, -----	—	—	—	—	—	1	—	—	—	—	—	—	1
Epilepsy, -----	—	—	—	—	—	1	1	—	—	—	—	—	2
Convulsions, -----	4	5	4	2	2	5	—	11	3	2	2	5	45
Paralysis of Brain, -----	—	1	—	—	—	—	—	—	—	—	—	—	1
Paralysis, -----	—	—	—	3	2	—	1	3	1	2	—	1	13
Shaking Palsy, -----	—	—	1	—	—	—	—	—	—	—	—	—	1
Tetanus, -----	—	—	—	—	—	—	1	—	—	1	1	—	3
Trismus Nascentium, -----	—	—	—	—	—	—	1	—	1	1	—	—	3
Laryngismus Stridulus, -----	—	—	—	—	—	—	—	—	—	—	1	—	1
Sun Stroke, -----	—	—	—	—	—	1	—	—	—	—	—	—	1
Congestion of Brain, -----	2	1	—	2	1	1	—	1	—	—	—	—	8
Disease of Brain, -----	1	—	—	—	1	4	—	3	2	1	—	1	13
Spinal Meningitis, -----	—	—	1	1	—	—	—	—	—	—	—	—	2
ORDER 2.—(Circulatory.)													
Paralysis of Heart, -----	—	—	—	—	—	—	1	1	—	—	—	—	2
Cardiac Hypertrophy, -----	—	—	—	1	—	—	—	—	—	—	—	—	1
Angina Pectoris, -----	1	1	—	—	1	—	—	1	—	—	—	—	4
Fatty Degeneration of Heart, -----	—	—	—	—	—	1	—	—	—	—	—	—	1
Pericarditis, -----	—	1	2	—	1	—	—	—	—	—	1	—	5
Endocarditis, -----	—	—	1	—	1	—	—	—	—	—	—	—	2
Valvular Disease, -----	—	1	—	—	—	—	1	—	—	—	—	—	2
Disease of Heart, -----	2	1	3	5	2	1	1	1	—	4	3	1	24
Cardiac Dropsy, -----	—	—	1	—	—	—	—	—	—	—	—	—	1
Hepatic Dropsy, -----	—	—	—	1	—	—	—	—	—	—	—	—	1
Dropsy after Scarlet Fever, -----	1	—	—	—	—	—	—	—	—	—	—	—	1
Dropsy, -----	—	2	—	1	—	1	1	4	4	1	2	—	17
General Atheroma, -----	—	—	—	—	—	—	—	—	1	—	—	—	1
Phlebitis, -----	1	—	—	—	—	—	—	—	—	—	—	—	1
Embolism, -----	—	1	—	—	—	—	—	—	1	—	—	—	2
Epistaxis, -----	—	—	—	—	—	—	—	—	—	—	1	—	1
ORDER 3.—(Respiratory.)													
Laryngitis, -----	1	—	—	—	—	—	—	—	1	—	—	—	2
Bronchitis, -----	2	3	1	1	—	1	—	1	1	—	2	1	13
Pneumonia, -----	6	4	9	10	3	1	3	—	—	6	5	5	52
Typhoid Pneumonia, -----	1	3	2	2	3	—	1	—	1	—	—	—	13
Pleuritis, -----	—	—	2	—	—	—	—	—	—	—	1	—	3
Congestion of Lungs, -----	1	1	1	2	2	1	—	—	1	—	1	1	11
Emphysema, -----	—	—	—	—	—	1	—	—	—	—	—	—	1
Hæmoptysis, -----	—	—	—	—	—	1	1	—	—	—	—	1	3
Paralysis of Lung, -----	—	—	—	—	—	1	—	—	—	—	—	—	1
ORDER 4.—(Digestive.)													
Stomatitis, -----	—	—	—	—	—	—	—	—	2	—	—	—	2
Gastritis, -----	—	1	—	—	—	1	—	2	—	1	—	—	5
Enteritis, -----	—	1	3	1	—	1	—	1	—	—	—	—	7
Peritonitis, -----	2	—	1	1	2	1	—	—	—	—	—	—	7
Jaundice, -----	—	—	1	—	—	—	—	—	—	—	—	—	1

CAUSES OF DEATH.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTAL.
CLASS V.—Violence.													
ORDER 1.—(<i>Violent Deaths.</i>)													
Intra Capsular Fracture of Femur,-----								1					1
Contusions,-----			1										1
Killed by Railroad,-----			1		1			1	1				4
Falls,-----			1	1	1		1						4
Burns and Scalds,-----					1			1	2				4
Poisoned by Gas,-----		1											1
Asphyxia,-----				1							1		2
Drowned,-----					2	1	2	1	1				7
Exposure,-----	1												1
Fracture of Skull,-----	1			1							1		3
Poison,-----					1	1							2
Powder Explosion,-----						2							2
Concussio Cerebri,-----			1	1									2
ORDER 2.—(<i>Suicide.</i>)													
Suicide,-----					1								1
Cause not Ascertained,-----		1	2	1	2	1	1			1			9
TOTAL DEATHS,-----													1073
Stillborn,-----	7	9	9	10	8	10	4	4	3	4	6	7	81

TABLE showing Deaths in New Haven in 1874 by Ages, Sexes, and Months.

AGES.	MALE.													FEMALE.													
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTAL.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTAL.	
Under 1 yr.	6	8	15	8	4	7	23	30	16	8	2	12	139	7	7	15	9	5	5	23	35	16	4	9	5	140	
1 to 5	6	2	4	6	4	5	1	9	8	5	2	1	53	8	7	6	6	3	4	5	11	5	3	11	5	74	
5 to 10	2	2	--	1	2	--	1	--	1	--	--	--	1	1	--	--	2	1	1	--	--	1	--	--	--	2	8
10 to 20	--	1	1	3	1	2	3	2	--	7	3	1	24	1	1	2	5	2	2	5	2	--	2	4	1	27	
20 to 30	4	4	1	6	3	6	2	4	6	5	4	2	47	6	5	5	9	2	8	3	7	3	3	1	2	54	
30 to 40	3	2	8	7	8	4	5	4	3	3	3	4	54	3	3	6	8	8	5	6	2	2	6	7	4	60	
40 to 50	4	6	5	5	6	7	7	2	7	4	2	3	58	3	4	6	6	6	6	3	3	4	6	2	3	52	
50 to 60	--	3	3	4	6	5	5	1	3	5	5	1	41	5	2	4	2	--	1	3	2	3	4	4	6	36	
60 to 70	1	2	1	4	4	5	4	2	5	--	3	1	32	7	5	1	5	4	6	2	3	2	4	6	3	48	
70 to 80	--	--	3	2	5	4	3	1	5	2	4	2	31	4	2	1	3	4	1	3	7	3	7	--	2	37	
80 to 90	--	1	3	--	3	--	--	1	1	--	1	--	10	1	--	1	2	2	1	3	2	--	3	4	2	21	
90 to 100	--	--	--	--	--	--	1	--	--	1	--	--	2	1	--	1	--	--	--	--	--	--	--	--	2	4	
Unknown	--	1	--	3	1	--	--	1	--	--	--	--	6	--	1	--	1	2	--	--	--	--	--	--	1	5	
TOTAL,	26	32	44	49	47	45	55	57	55	40	29	28	507	47	37	48	58	39	40	56	74	39	42	48	38	566	

SEVERAL CITIES COMPARED IN REGARD TO MORTUARY STATISTICS.

A table showing the mortality in a number of cities for a series of years, affords a much more satisfactory means of estimating the comparative salubrity of different places than the estimates based on the mortalities of any single year. An epidemic of fatal character prevailing for a limited period in any city, while other cities were enjoying their customary healthfulness, would, in comparison, exhibit an unjust discrimination, if only one year were the basis of computation. This is well illustrated in the following table. In New Orleans the rate in 1867 was over 54, but very much less in all the other years. In St. Louis, in 1866 the rate was 46 per thousand, while the average of the succeeding years was not half that. By the following table, covering a period of from four to nine years, a very just idea of the mortality of different localities can be gained.

TABLE of Death-Rates, showing the number of Deaths annually per thousand of Inhabitants in the following Cities.

UNITED STATES CITIES.	1866.	1867.	1868.	1869.	1870.	1871.	1872.	1873.	1874.
New York, -----	33.5	32.3	25.4	29.4	29.3	27.5	32.6	27.9	---
Philadelphia, -----	24.3	19.8	20.6	20.2	22.7	22.6	26.3	20.3	---
Brooklyn, -----	27.8	27.8	24.4	---	24.1	24.7	30.0	25.2	---
St. Louis, -----	46.3	30.2	20.6	20.6	21.3	16.8	23.0	---	---
Chicago, -----	32.2	21.2	23.7	23.2	24.5	21.5	27.6	23.9	---
Baltimore, -----	---	24.4	---	---	25.9	25.2	25.9	---	---
Boston, -----	22.8	---	---	23.3	24.3	22.7	30.5	28.4	20.8
Cincinnati, -----	34.9	20.1	24.6	18.0	---	21.7	20.5	22.8	---
New Orleans, -----	---	54.3	27.4	---	36.2	28.0	30.6	35.8	---
San Francisco, -----	21.0	19.2	25.5	23.3	21.0	17.4	17.5	20.3	---
Providence, -----	---	---	17.3	18.8	18.3	17.6	21.1	21.9	19.9
New Haven, -----	19.5	17.6	19.0	24.3	26.3	20.6	23.1	22.4	18.2
Average fourteen large cities, -----	---	---	---	---	24.6	24.1	26.6	---	---
GREAT BRITAIN.									
London, -----	---	---	---	---	24.0	24.7	21.4	22.4	---
Liverpool, -----	---	---	---	---	31.1	35.1	27.0	25.9	---
Glasgow, -----	---	---	---	---	29.8	32.9	28.4	---	---
Manchester, -----	---	---	---	---	27.8	31.2	28.5	30.2	---
Birmingham, -----	---	---	---	---	21.1	24.9	22.9	24.8	---
Dublin, -----	---	---	---	---	24.0	26.2	28.9	---	---
Leeds, -----	---	---	---	---	28.2	26.4	27.8	27.5	---
Sheffield, -----	---	---	---	---	25.2	28.3	26.0	---	---
Edinburgh, -----	---	---	---	---	26.3	26.9	26.4	---	---
Bristol, -----	---	---	---	---	29.9	23.2	22.0	---	---
Newcastle, -----	---	---	---	---	25.4	32.2	26.3	30.3	---
Average twenty-one large towns, -----	---	---	---	---	25.8	26.9	24.3	24.0	---

TABLE showing Deaths by Classes in New Haven for Ten Years.

CAUSES OF DEATH.	1865.	1866.	1867.	1868.	1869.	1870.	1871.	1872.	1873.	1874.
Zymotic Diseases, -----	357	221	159	273	316	376	288	382	379	219
Constitutional Diseases, ---	254	208	208	194	232	300	203	229	261	249
Local Diseases, -----	354	272	268	262	406	424	411	461	426	399
Developmental Diseases, ---	82	30	44	50	94	107	86	100	110	161
Violence or Negligence, ---	56	27	27	25	46	36	36	41	42	35
Unknown Causes, -----	26	25	19	4	37	31	20	18	18	10
TOTAL, -----	1129	783	725	808	1131	1270	1044	1231	1236	1073
Stillborn, -----	37	61	64	82	47	66	48	41	41	81

From the above table it will be observed that there has been during the past year a very striking decrease in mortality from Zymotic diseases. But once before only, in the whole ten years included in the table, has New Haven been so favored. This is chiefly due to the most remarkable exemption from scarlet fever enjoyed by the children during the year just closed. While for the preceding five years, the deaths from scarlet fever have averaged eighty-four per year, during the year 1874 there were but three fatal cases of that disorder recorded.

The only class in which an increase over previous years is shown is the Developmental. This is in part rather apparent than real, and due to the imperfect system of classification of previous records, and still more to inaccuracy in the certificates of death. In this connection it is a matter of interest to compare the mortality of 1874 not only with previous years in our own city, but also to note the relative fatality of the different classes of disease in other cities; hence the subjoined table, showing the percentage of deaths in each class to the total mortality, has been prepared. It refers, with two exceptions, to the year 1873, being the most recent statistics available, but for New Haven the rates are given for the last three years.

Percentage of Deaths in each Class to the total Mortality.

DISEASES.	S. Francisco, 1866-73, average of 7 yrs.	San Francisco, 1873.	New York, 1872.	Philadelphia, 1873.	Brooklyn, 1873.	Chicago, 1873.	Boston, 1873.	Cincinnati, 1873.	New Orleans, 1873.	Buffalo, 1873.	Liverpool, 1872.	Birmingham, 1873.	New Castle, 1873.	New Haven, 1872.	New Haven, 1873.	New Haven, 1874.
Zymotic Diseases,	23.5	22.6	36.2	18.8	31.8	37.8	31.0	34.9	32.3	29.1	24.9	26.6	25.8	31.0	30.7	20.4
Constitutional “	18.5	17.4	20.2	18.5	17.6	12.8	20.9	14.4	14.4	14.3	16.7	13.5	14.3	18.5	21.1	23.2
Local “	38.6	36.2	33.4	41.6	34.9	36.9	32.1	37.3	38.8	35.5	38.9	38.3	40.3	37.5	34.5	37.2
Developmental	11.5	10.7	6.2	17.2	12.9	8.6	12.0	9.3	10.6	10.3	12.9	16.6	14.3	8.1	8.9	15.1
Violence, -----	4.5	4.2	4.0	3.7	2.7	3.9	3.9	3.4	3.1	3.6	4.3	4.9	4.1	3.4	3.4	3.2
Unknown, -----	3.4	8.9	---	.2	.1	---	.1	.7	.8	5.2	2.3	.1	1.0	1.5	1.4	.9

SPECIAL DISEASES.

Only a few tables have been prepared to exhibit the activity of those diseases which in New Haven are most fatal, and to compare them with the prevalence of the same in other cities. If the results seem unfavorable to our city, it should be remembered that the tables show the comparative fatality of diseases known to be most fatal here, but not necessarily so in the other cities with which the comparison is made. If now the student will examine the table in which the fatality of the class to which the special disease belongs is shown, he will find that New Haven will still show a satisfactory record for healthfulness, although by comparing a selected member of that class it would seem the reverse. To illustrate by the following table, it appears that in 1873, typhoid fever destroyed nine in every 10,000 of the population in New Haven, while in Chicago the fatality was only seven. But typhoid fever is a member of the zymotic class of diseases. If now we compare the mortality of the whole class in the two places, we find that while 30 per cent. died in New Haven in 1873, there were 37 per cent. died in Chicago in the same year.

No. of Deaths to each 10,000 of the Population.	S. Francisco, '73-4, exclu. of Chinese.	New York, '72.	Philadelphia, '73.	Brooklyn, '73.	Chicago, '73.	Boston, '73.	Cincinnati, '73.	New Orleans, '73.	Buffalo, '73.	Providence, '73.	Liverpool, '72.	Birmingham, '73.	Newcastle, '73.	New Haven, '73.	New Haven, '74.
From Typhus and Typhoid Fever, --	4	4½	5	2½	7	9	3	3	6	7	8	6	4	9	8

Number of Deaths to each 10,000 Inhabitants.	S. Francisco, 1873-4, exclusive of Chinese.	New York, 1872.	Philadelphia, 1873.	Brooklyn, 1873.	Chicago, 1873.	Boston, 1873.	Cincinnati, 1873.	New Orleans, 1873.	Buffalo, 1873.	Providence, 1874.	Liverpool, 1872.	Birmingham, 1873.	New Haven, 1874.
Consumption, -----	25	43	31	31	16	43	26	42	14 $\frac{1}{2}$	27	32	23 $\frac{1}{2}$	33 $\frac{1}{2}$
Pneumonia, Bronchitis and other Lung Diseases, ----	14	34	18	26	18	28	12	26	13	16 $\frac{1}{2}$	45	43	16 $\frac{1}{2}$
TOTAL, -----	39	77	49	57	34	71	38	68	24 $\frac{1}{2}$	43 $\frac{1}{2}$	77	66 $\frac{1}{2}$	50
Per cent. of Total of all Lung Diseases to all Deaths, ---	22.2	23.5	23.6	22.9	14.4	24.9	15.3	19.1	17.2	---	28.4	26.2	27.4

The most instructive feature in the above table is the remarkable difference in the fatality of consumption between the inland cities and those on our seaboard. For instances, contrast Buffalo with Boston, Chicago with New York.

No. of Deaths to each 10,000 of the Population.	S. Francisco, '73-4, exclu. of Chinese.	New York, '72.	Philadelphia, '73.	Brooklyn, '73.	Chicago, '73.	Boston, '73.	Cincinnati, '73.	New Orleans, '73.	Buffalo, '73.	Providence, '73.	Liverpool, '72.	Birmingham, '73.	New Haven, '73.	New Haven, '74.
From Cholera Infantum.	5	42	15	25	34	24	9	7	14	11	17	16	13	15

From the above table it would appear that cholera infantum has some relation to the latitude of cities, those in the north suffering more than the southern cities, while in large seaports, like New York, with the always unfavorable hygienic circumstances of a vast mobile population, this disease is fearfully fatal.

Number of Deaths to each 10,000 Inhabitants.	S. Francisco, '73-4.	New York, '72.	Brooklyn, '73.	Chicago, '73.	Boston, '73.	Cincinnati, '73.	New Orleans, '73.	Buffalo, '73.	Providence, '74.	New Haven, '74.
From ALL causes,-----	200	326	252	239	284	228	358	138	199	182

Here we see a very great disparity between the different cities; the death rate of New Haven being the lowest with only one exception, that of Buffalo. But the table shows nothing else than the disparity, and is inserted chiefly as an illustration of the need of full statistics concerning the particulars respecting social position, nativity, modes of life, and all hygienic conditions of the various peoples of these different cities. With such facts complete, without doubt a satisfactory explanation of the above disparity could be discovered.

*Statement of the Births and Marriages in New Haven during
the year 1874*

BIRTHS.

January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTAL.	SEX.
82	101	97	80	78	74	100	97	84	106	70	72	1041	Males, -----
83	99	79	72	70	88	88	82	89	67	66	65	948	Females, -----
---	---	---	---	---	1	1	---	---	---	1	---	3	Sex not returned, --
165	200	176	152	148	163	189	179	173	173	137	137	1992	TOTAL, -----

Of this number, COLORED males, 25; females, 31; sex not stated, 0; total, 56.

Number of cases of plurality births, *included with the above*, 22.

Number of illegitimate births, *included with the above*, 22.

The birth rate is 1 in 30 of the population, or 34 per thousand of the population.

According to the Registrar-General's (England) Report for 1871, the birth rate in that year for England and Wales was 35; for Scotland, 34.5; and for Ireland only 28.1 per 1000 of the population. The same year in Dublin the birth rate was 29 per 1000; in London, 35.4; in Glasgow, 39; and in Edinburgh, 34.

MARRIAGES.

RESIDENCE.	NATIVITY.
Both parties residents of this State, 558	Both parties American, ----- 321
Husband residing out of the State, 44	Both parties Foreign, ----- 179
Wife residing out of the State, 14	American Male and Foreign Female, 44
Both non-residents, 10	Foreign Male and American Female, 70
Residence unknown, 1	Nativity unknown, ----- 13
Total number of Marriages, --- 627	Total number of Marriages, --- 627

Number of Marriages between persons of Color, *included with the above*, 20.

ANNUAL REPORT
OF THE
CLERK OF THE BOARD OF HEALTH,
FOR THE YEAR 1874.

To the Board of Health of the City of New Haven :

GENTLEMEN—The second calendar year of the Board of Health as a distinctive branch of the City Government has drawn to a close. The duties of the Standing Committee of the Board have been principally to examine complaints of nuisances, caused by the accumulation of filth in yards, neglected privies, pond holes, water courses, &c. There have been some complaints from sewer connections, arising mostly from improper connections, or rather a desire to use the sewer for basins, &c., upon an economical scale, without being properly trapped. Some owners or agents of property deem it only necessary to connect a basin or sink by pipes with the sewer for the escape of excrement, &c., without considering the baneful influence of sewer-gas in houses, stores and manufactories upon the inmates in regard to health.

In the opinion of the Executive Officer of the Board a by-law should be passed by the Court of Common Council, prohibiting plumbers to connect sinks and privies with the sewers without the proper safeguards to protect the health of the public.

Some complaints have been made from cesspools in rear yards, where there are no sewers in the streets, especially from old cesspools built years ago, supposed to be large enough to last a family a generation. But by a general use of the city water, people use so liberally and profusely that in a short time the cesspools become full, and in numerous instances the contents set back through the walls into the cellars of the houses, and are unquestionably a prolific source of disease. It is not infrequent to see the water

bubbling up through the surface of the ground from the top of the cesspool when the water is running from the faucet in the dwelling. In a number of instances of this character, the proprietors of houses have solicited your committee to aid them in getting sewers built in the streets. The Committee of the City Government upon sewers have invariably recommended the building of sewers upon the request of this Board.

Since July last, the Board has published monthly mortuary statistics, and meteorological observations, in circular form, for the use of the medical profession and for exchanges, which are believed to be of value to the public in furnishing information in the cause of science—information which could not otherwise be obtained.

During the past year, upon the recommendation of your committee, the Board recommended the Court of Common Council to order a street and sewer through the old run or swamp between Broad and Water streets, which recommendations were adopted and the same ordered. These improvements, when carried out, will no doubt be of incalculable benefit to that portion of the city. By the building of the Canal street sewer, that old nuisance, the Foote street pond, has been abated. Within the past year the land on Foote street, where was once that pond, has all been built upon. The cellars of the surrounding houses, which were annually filled with water, are now dry.

There are other like ponds in different sections of this city which should receive the attention of this Board.

The old basin between Water street and the New York Railroad has been mostly filled up; a small portion of the same belonging to the Derby Railroad remains open, and recently has been the source of complaint from offensive odors, as well as a small portion supposed to belong to the City.

In the opinion of the Executive Officer of the Board, this whole section should be underdrained before being occupied for building purposes.

The second year of the removal of garbage by the City has proved the wisdom of those who inaugurated this public improvement. The whole number of complaints of neglect or omission to remove were two hundred and fifty-eight, of which number one hundred and seventy-six were during the first six months, and eighty-two for the last half of the year. The amount of garbage removed from the city, thus preventing the evaporation of noxious poisonous gases, is in excess of fourteen hundred cords.

There have been a total of three hundred and twenty-one complaints of nuisances made to this department which required personal inspection, and in which three hundred and two orders were issued for abatement.

Two hundred and sixty-nine permits have been issued during the year for the emptying of privies and cesspools. One hundred and twenty-three of them were issued out of season, for which a fee of fifty cents for each permit was received, making a total of sixty one $\frac{50}{100}$ dollars, which amount has been paid over to the tax collector.

The Board have held thirty-six meetings during the year.

The expenses of the Board of Health for the year 1874 has been for

Salaries, &c.	\$2,059.00
Printing and Stationery	330.95
Garbage, removal of	5,038.49
Furniture, &c.	255.95
Postage	15.72
Sundry small accounts	46.95
Total	<u>\$7,747.06</u>

Respectfully yours,

C. R. WHEDON,

Clerk and Executive Officer of the Board.

New Haven, Conn., Jan. 1st, 1875.

C. A. LINDSLEY, M. D.

Health Officer of New Haven.

Dear Sir,—I have the honor to report that during the quarantine season ending November 1st, 1874, fifty vessels arrived at the port of New Haven subject to quarantine law, as follows:

Vessels from England,	4
“ “ the British Provinces,	9
“ “ Egypt,	1
“ “ Scotland,	1
“ “ West Indies,	27
“ “ U. S. Coast,	8

The state of health on these vessels was uniformly good, requiring a clean bill of health in every instance.

Respectfully submitted,

J. F. LINES, M. D.,

Deputy Health Officer.



UNIVERSITY OF ILLINOIS-URBANA



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